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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number	10/749,089
Filing Date	12/30/2003
First Named Inventor	Mauro Dresti
Art Unit	2173
Examiner Name	not assigned
Attorney Docket Number	81230.87US2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Form PTO/SB/08a - return postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Customer No. 34018 Greenberg Traurig, LLP	
Signature		
Printed name	Gary R. Jarosik	
Date	February 7, 2006	Reg. No. 35,906

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Vivian DelaRosa

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Dresti et al. )  
Serial No.: 10/749,089 )      Examiner: not assigned  
Filed: 12/30/2003      )      Group Art Unit: 2173  
Title:      USER INTERFACE FOR      )      Docket No.: 81230.87US2  
              A REMOTE CONTROL      )  
              APPLICATION      )

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (37 CFR §1.97(b)(3))**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

With regard to the above-identified application, pursuant to 37 C.F.R. §1.56, the items of information listed on the enclosed Form PTO/SB/08a are brought to the attention of the Examiner.

This statement should be considered because it is submitted, pursuant to 37 C.F.R. §1.97(b)(3), before the mailing of a first Office action; therefore, no fee is required.

In accordance with 37 C.F.R. §1.104, no representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§102 and 103 and Applicant reserves the right, pursuant to 37 C.F.R. §1.131 or otherwise, to establish that the reference(s) are

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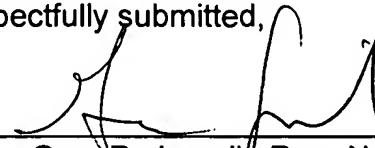
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By: Vivian DelaRosa  
Name: Vivian DelaRosa

not "prior art." Moreover, Applicant does not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of MPEP 609, it is requested that the Examiner return a copy of the attached Form PTO/SB/08a, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

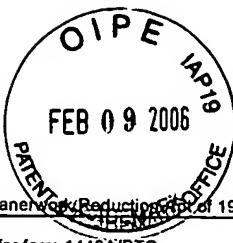
Respectfully submitted,

By: 

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77 W. Wacker Drive - Suite 2500  
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Date: February 7, 2006

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**Substitute for form 1449AVPTO**

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

**(Use as many sheets as necessary)**

Sheet

1

2

1

**Complete if Known**

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to a collection of information about it, including "I HAVE  
INVENTED" and "PATENT PENDING".

**Complete if Known**

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Examiner Name	not assigned
Attorney Docket Number	81230.87US2

## **U. S. PATENT DOCUMENTS**

## **FOREIGN PATENT DOCUMENTS**

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>5</sup>
		Country Code <sup>3</sup> "Number <sup>4</sup> "Kind Code <sup>5</sup> (if known)				

**Examiner  
Signature**

Date Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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